**Application or Docket Number** 

Eliocate Describer 0, 2004									10	15	67356		
		CLAIMS A	AS FILED -		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
U.S	. NATIONAL	STAGE FEES			<u> </u>	Column 2)	Γ	RATE	FEE	1	RATE	FEE	
BAS	SIC FEE		SMALL ENT. = \$ 150		LARC	GE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE		
EX/	MINATION FE	Ε	Satisfies PCT A			ther situations =		EXAM. FEE			EXAM. FEE	300	
SEA	NRCH FEE		U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		All of	ther situations = 5 250 / \$ 500		SEARCH FEE			SEARCH FEE	200 400	
FEE	FOR EXTRA	SPEC. PGS.	minus 100 =			/ 50 =	-	X \$ 125 =	1,	1	X \$ 250 =	700	
TO1	AL CHARGEA	BLE CLAIMS	12 mir	nus 20 =	• -			X \$ 25 =		OR	X \$ 50 =		
IND	EPENDENT CL	AIMS	2 minus 3 =					X \$ 100 =		OR	X \$ 200 =		
MUL	TIPLE DEPEN	DENT CLAIM PR	ESENT				ſ	+ \$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2							-	TOTAL		OR	TOTAL	900	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	+ \$ 180 =		OR	+ \$ 360 =		
								OTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur	nn 2)	(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUMI PREVIO PAID	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	ſ	X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=	Γ	X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
										OR	TOTAL ADDIT. FEE		
					٠								
<ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".</li> <li>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</li> </ul>													

FORM PTO-875 (Rev. 02/2005)